Foster Family Home - Corrective Action Report

Provider ID:

1-577695

Home Name:

Daisy Ganancial, CNA

Review ID:

1-577695-5

92-366 Waiomea Street

Reviewer:

Maribel Nakamine

Kapolei

HI 96707

Begin Date:

10/4/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

Home inspection for a 3 person CCFFH recertification made on 10/4/19.

Home is in compliance with all requirements. Home will receive a 3 bed certification.

Compliance Manager

Primary Care Giver

Date

10-4-19

Date